ITEM	EDULE B (FEC Form	y Use se	eparate schedule(s)	FOR LINE (check only	NUMBER: PAGE 397 / 413
	IIZED DISBURSEMEI		ch category of the ced Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
					for the purpose of soliciting contributions licit contributions from such committee
NAM	ME OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS				
	Full Name (Last, First, Middle Initial) FORWARD TOGETHER PAC				Transaction ID: EXP.B.72948 Date of Disbursement
Maili	Mailing Address 201 NORTH UNION STREET, SUITE 300				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 1^T & 2^T & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} N & Y & Y & Y & Y & Y \\ 2^T & 0^T & 9^T \end{bmatrix}$
	EXANDRIA	State VA	Zip Code 22314		Amount of Each Disbursement this Period
	pose of Disbursement			011	5000.00
LEA	ADERSHIP PAC ce Sought: House	Disbursement For		Category/ Type	
State	Senate President	Primary			
Full	Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE				Transaction ID: EXP.B.72949 Date of Disbursement
Maili	Mailing Address P.O. BOX 15734				$\begin{bmatrix}\begin{smallmatrix}M\\1&2\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\0&8\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2&0&0&9\end{smallmatrix}$
City WA	, ASHINGTON	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	pose of Disbursement			011	2500.00
O -	Candidate Name KIRSTEN GILLIBRAND			Category/ Type	
	13 I EN GILLIDHAND				
Offic	ce Sought: House X Senate President	Disbursement For Primary Other (s			
KIR Office State	ce Sought: House X Senate President District:	Primary	X General		Transaction ID. TVD D 70050
State Full	ce Sought: House X Senate President	Primary	X General		Transaction ID: EXP.B.72950 Date of Disbursement
State Full JOE	ce Sought: House X Senate President District: Name (Last, First, Middle Initial)	Primary Other (s	X General		Date of Disbursement
State Full JOE Maili City	ce Sought: X Senate President te: NY District: Name (Last, First, Middle Initial) EPAC ling Address 62 PARADISE	Primary Other (s	X General		Date of Disbursement M M / D 0 8 / Y Y Y O Y 9 Amount of Each Disbursement this Period
State State Full JOE Maili City ROI Purp	ce Sought: X Senate President District: Name (Last, First, Middle Initial) EPAC ling Address 62 PARADISE NKS pose of Disbursement	Primary Other (s	X General specify) ▼	011	Date of Disbursement 12 0 8
State State Full JOE Maili City ROI Purp	ce Sought: House X Senate President	Primary Other (s	X General specify) ▼ Zip Code 17572		Date of Disbursement M M / D 0 8 / Y Y Y O Y 9 Amount of Each Disbursement this Period
State State Full JOE Maili City ROI Purp	ce Sought: House X Senate President District: Name (Last, First, Middle Initial) EPAC ling Address 62 PARADISE NKS pose of Disbursement diddate Name ADERSHIP PAC ce Sought: House Senate President	Primary Other (s E LANE State PA Disbursement For Primary	X General specify) ▼ Zip Code 17572	011 Category/	Date of Disbursement M M / D 0 8 / Y 2 0 0 9 Amount of Each Disbursement this Period